MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ACDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing. Entitie (Complete only if there is a change) a00₩ 1. CORRESPONDENCE ADDRESS INVENTOR'S NAME lence is being deposited with the herapy cartity that this correspon Service with sufficient posted east lirst class mail in an envelope add City, State and ZIP Code 34M2/Q711 CO-INVENTOR'S NAME strict (1) 1400 K ST., 2023 Street Address WASHINGTON, DC 20005-2477 JUL 1 4 1995 City, State and ZIP Code WATSON, COLE et al Check if additional changes are on reverse side TOTAL CLAIMS (918C) SERIES CODE/SERIAL NO. FILING DATE **EXAMINER AND GROUP ART UNIT** DATE MAILED 08/243,483 BRINSON First Named **Applicant** <u>MEZZALIRA</u> <u>RINALDO</u> TITLE OF INVENTION HAIN MESH NETWORK HOSE (अट्यू) ATTY'S DOCKET NO. **CLASS-SUBCLASS** BATCH NO. APPLN. TYPE SMALL ENTITY **FEE DUE** DATE DUE 3 676022 pages, such as an assignment or tornal drawing, must have its own celaficace of mailing. WATSON, COLE, 3. Correspondence address change (Complete only if there is a change) 4. For printing on the patent front page, list the names of not more than 1_GRINDLE & WATSON 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. Barden Faur Statement: This form is estimated to take 2 hours to conve vary depending upon the needs of the individual case. Any comments on the amount of 🕤 time you are required to com/Met@0b50/2 rm should be sent to the Office of Metastal On 20/00 MV 080. Systems, Patent and Trademark Office, Washington, D.C. 20231, and to the Office of Information and Regulatory Affairs, Office of Management and Budges and Marke and Affairs as or Area Thampieza a

0033), Washington, D.C. 20503. DQ NOT SEND FEES OR COMPLETED FORMS TO (1) NAME OF ASSIGNEE:

(2) ADDRESS: (CITY & STATE OR COUNTRY)

Fara Vicentin (VI) ITALY

- A.

 This application is NOT assigned.
- XXAssignment previously submitted to the Patent and Trademark Office.
- Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

LUS OF Bello control of the business of the state of the

6b. The following feel should be changed \$100 (rt 25)

DEPOSIT ACCOUNT NUMBER 23-0575 (ENCLOSE PART C)

Advance Order - # of Copies X Arry Deficiencie in Enclosed Fees

The COMMISSIONER ON PATENTS AND TRADEMARKS IS requested to apply the Iss Fee to the application Identified abo

John P

9/28/95 25,50\$

(Date)

NOTE; The issue Fee will not be accepted from anyone other than the v or agent; or the assignee or other party ered attorn in Interest as shown by the records of the Patent and Trademark Office.

No

1. TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE